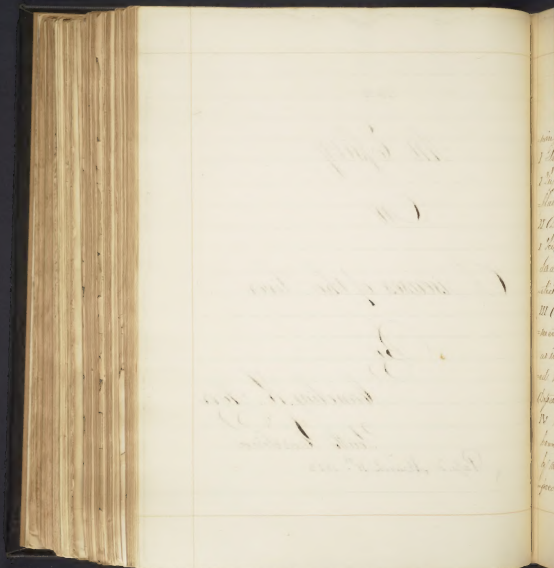


No 30

An Essay
On
Diseases of the Liver

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Diseases of the Liver.

The arrangement which I intend pursuing in this dissertation is the following.

I. Inflammation. 1. Acute 2. Chronic. Terminations

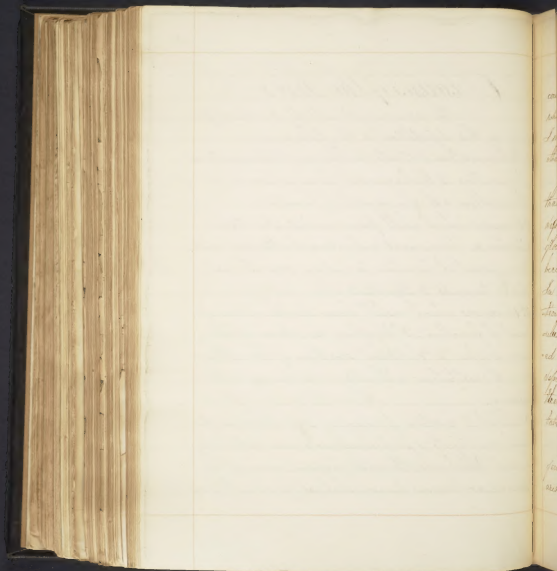
1. Absorption. 2. Enlargement from adhesion in inflammation. 3. Disarrangement of functions.

II. Diseases which result from morbid structure.

1. Cirrhosis a permanent enlargement attended with disarrangement of functions including several varieties of tumours. 2. Hydatids.

III. Diseases which result from simple disarrangement of functions. 1st Excessive secretion of bile, as in Cholera. 2nd Deficient secretion of bile attended with constipation a Huntery & sometimes with Jaundice.

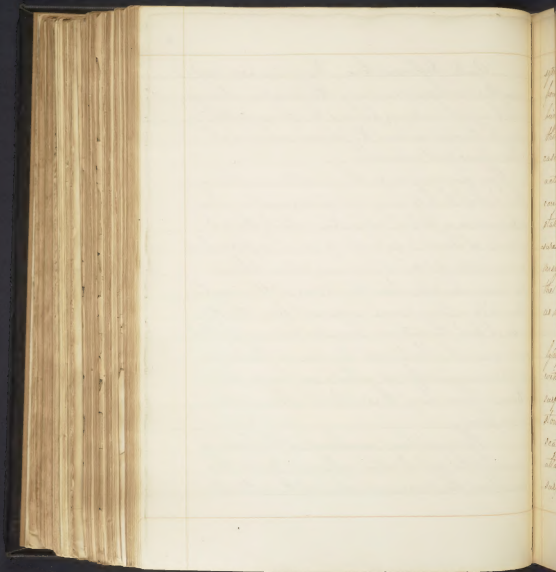
IV. Stagnated secretion producing several forms of bowel complaints & producing, as is now supposed by most Pathologists, the most frequent cause of all precocious & nervous diseases; such as Epilepsia, Chorea,



Acute Inflammation: Physicians have not come to a conclusion concerning the process a change which a part undergoes previous to inflammation; I shall therefore embrace the opinion which of all others appears most reasonable.

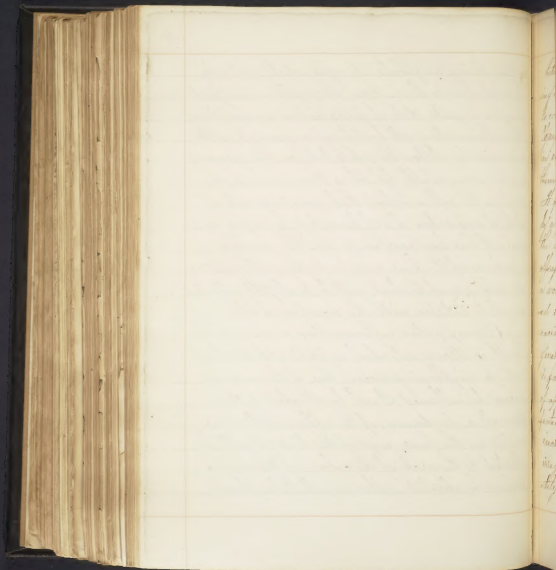
When from any cause the circulation is increased that part of the body being most predisposed a whose vessels are in a state of relaxation admit the red globules of blood to pass into its small vessels which become distended & a state of congestion follows. In warm climates where the action of the circulation is for a time much increased from the stimulus of heat, the extreme branches become debilitated & are not able to resist the force of the large vessels & consequently red globules are forced into them, & from being thus irritated inflammation takes place.

The enveloping membrane of the liver is generally the seat of active inflammation & this arises from the increased action of the arterial



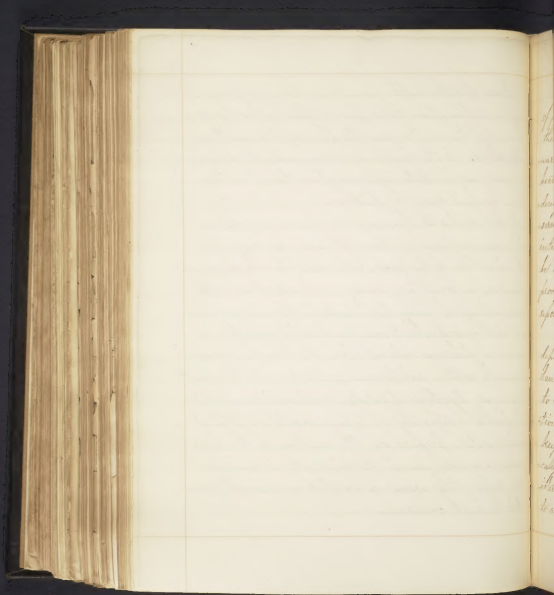
spirit, forcing red globules into vessels which naturally pour out a serous fluid. Should the vessels in our part being in a greater state of predisposition or relaxation, the inflammation will be topical or general as the case may be. When the vessels take on this diseased action a coagulable lymph is thrown out which contains the inflammation that soon runs into a state of suppuration if not prevented by proper measures. It has been ascertained, that the enclosing membrane of the liver may be highly inflamed & the substance of the liver will be so slightly affected as not to interfere with the secretion of bile.

During active inflammation a coagulable lymph is thrown out which agglutinates the liver with its neighbouring viscera, thus, if the concave surface be inflamed it will be attached to the stomach & duodenum; if the inflammation is seated on the lower edge of the liver, it will be attached to the arch of the colon; if the convex surface be affected, adhesion will take place



between it & the diaphragm. While this process is going on, respiration takes place & these adhesions serve to confine the matter from the place of its formation. Symptoms. As the symptoms are so nearly the same in every case of acute inflammation, I shall notice them as laid down by Faithorn.

It first makes its appearance by shivering, followed by a pungent pain in the right side, shooting in the direction of the back & the shoulder blade, cough, oppression in breathing, anorexia, sickness, often with a vomiting of apparent bilious matter, accompanied with considerable fever, great watchfulness & occasional delirium, extreme thirst, the tongue covered generally with a white crust, extending to the mouth & fauces; depression of spirits, sometimes hiccup, loss of appetite & difficulty of lying, excruciating pain on the right side; pressure on the region of the liver increases very much the pain; the bowels are irregular; the urine is secreted in small quantity & high coloured.



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The first thing I noticed
when I stepped out of the
train was the cold. It was a
sharp, biting cold that I had
not felt in months. The wind
was strong and the sun was
hidden behind a thick layer of
clouds. I shivered as I walked
towards the station. The people
around me were all dressed in
heavy coats and hats. I felt
out of place in this winter
world. I had come from a warm
climate and was not used to
the cold. I looked around me
and saw that everyone else
seemed to be used to it. They
were walking briskly, their
breath visible in the air. I
felt a little better as I walked
on. The cold was not so bad
after all. I was used to it now.
I had come to the right place.
I was home.

The next thing I noticed was
the smell. It was a strange
smell, like old books and
dust. I had never smelled
anything like it before. I
looked around me and saw
that everyone else was also
looking at the smell. They
were all sniffing the air. I
felt a little better. The smell
was not so bad after all. I
was used to it now. I had
come to the right place. I
was home.







The first of these is the fact that the
 human mind is not a blank slate, but
 is filled with ideas and feelings from
 birth. This is the case with all
 animals, and it is the basis of all
 learning and development. The mind
 is not a passive receiver of information,
 but an active participant in the process
 of knowledge. It is the mind that
 interprets the world around it, and
 it is the mind that creates the
 meaning of our experiences. The mind
 is the source of all our thoughts and
 feelings, and it is the mind that
 guides our actions. The mind is the
 most important part of the human
 body, and it is the mind that makes
 us who we are.





[illegible]



With the exception of adhesions, the liver is not subject to indurations or to substance. They add an accession new to old age, in youth as they can be seen affected with them. This appears to be owing to the greater quantity of acerbities or earthy matters existing in the blood of the old subject. In order to this conclusion, from seeing the bones of old people becoming brittle, from a want of animal matter. Hence this additional disposition of matters are readily understood the formation of the most common tubercles of the liver.

There are no exact symptoms by which we can ascertain the nature & appearance of the different varieties of liver is to which the liver is subject. Even the common tubercles exist. The liver is not increased in size, but there is an accumulation in the right hypochondrium. Where the parietes of the abdomen are thin & the liver is situated upon the lower anterior surface of the liver, they may be felt with the fingers.



The white trachea is in some instances, a small,
 and in others a large, tubular structure, and
 the surface, when they exist, which is very rare. The
 trachea is more increased in size. The vessels of
 the trachea are in the trachea, though not in the trachea
 increasing in size of the trachea. From this it is
 evident, they have been supposed to be the trachea
 trachea. The trachea is in the trachea. The trachea is
 more found in the trachea. There is
 another species in which the trachea is soft and
 wet. These parts of the trachea of the trachea are
 trachea. The trachea is sometimes found in a state
 of trachea, without the trachea. The trachea
 is. This change is brought on by what the trachea
 is called in the trachea. In the trachea, the
 trachea are removed in the trachea, without
 ulceration. The trachea of these trachea
 & trachea are so nearly the same, that it
 would be useless to notice them separately when
 their existence can only be ascertained by the



and them with the finger.

Hypodids. With the exception of the *Hidra* they are most frequently found in the liver. They are generally found in the same way as the *Hidra*, or are found in the same position in a fluid condition. They are of various sizes, the smallest being about the size of the *Hidra*. They are most commonly found in the substance of the liver, but are sometimes found attached to the outer side, occupying a part of the cavity of the abdomen. As to the origin of these animals, *Hidra* is not a dead, though it is generally believed they are living animals.

There are no symptoms directly indicating the existence of *Hypodids* in the liver. & the disease can only be guessed at in the living subject. In two cases which came under the notice of Dr. Baile, the symptoms were similar to an attack of gall stone. There was a violent pain in the right side near the pit of the stomach, frequent vomiting of



guarding with a diet not unvaried.

In the management of this disease, the only resource
lies in the use of purgatives. Care must be taken to have
a cathartic prepared for long time, & at least until a change
is produced in the character of bile. In the treatment
of this disease we are not to overlook the occasional
use of cathartics & a proper regulated diet, which
is so necessary.

We next come to diseases which result
from simple derangement of function.

The most simple derangement of the bowels, is
where there is a simple increase of secretion, but
when the secretion is very immediate, it imports
the patient to great inconvenience & the dangerous
disease he is in weather & particularly in the
East Indies this derangement is very frequent,
though the person should be particular in reg-
ulating his diet & exercise the reduction of in-
temperance. It is observed by writers on tropical
climates, that the natives are not so subject



be seen, from an increased secretion of bile, as there
gas. This is quite in the right; we observe no other
stimulated & excited habit, which shows that the
secretion of bile is increased in direct proportion to the
secretion of bile. The secretion of bile is increased in
the vascular system is just the same, as it is increased
in the heat, it is the secretion of bile, for the secretion
of bile is generally in direct proportion to the quantity
of blood circulating through the liver. & Thomson
thinks heat alone, is capable of increasing the se-
cretion of bile, as well as of producing more serious
diseases of the liver. This, however, does not appear
to me exactly tenable. Prismatic, & concave,
must always be combined with heat to produce
such effects.

The diseases consequent on an increased secre-
tion of bile, are so numerous, that I shall only men-
tion a few of them. The theories of fever are almost
as numerous as the cases; but bilious fever depends
wholly, if not entirely, upon a vitiated secretion
of bile. When the bile is passing into the natural



passes, a portion of its watery part is absorbed
 & carried into the circulation, which gives the
 skin a yellow tinge, while the more active part
 is poured into the duodenum, producing nausea,
 sickness, foul tongue & vomiting. The usual symp-
 toms of bilious fever. It is the opinion of C. Mead,
 that bile in malignant fevers, is taken from the
 intestines & carried into the circulation by the lac-
 tals. But it appears most probable, that either a
 sepsis or a cholera morbus would be induced, previous
 to its absorption & rather before a sufficient quantity
 be absorbed to produce a fever. It is the opinion of
 Dr Saunders, as well as most other authors that bile
 is not the cause of bilious fever. He observes, that
 nausea & vomiting is produced by an inflamma-
 tion of the pylorus & upper surface of the duodenum
 & the bile found in the stomach is the effect & not
 the cause of fever. As it has never been proved,
 that inflammation preceded the admission of bile
 into the stomach, it appears most probable to me,



That the inflammation is the effect of the accumulation of the bile. Again, that fever does depend upon a vitiated secretion of bile, is evident from the disease being frequently removed upon the correction of the secreted bile or upon restoring the secretory organ to its healthy condition.

It is the opinion of Dr Saunders, that the *typhus* in *cholera morbus*, is a combination of bile & blood, he observes, the rapid manner in which it is poured into the duodenum confirms the opinion, that time is not allowed for its proper secretion. From the rapid circulation in the blood, a quantity of red globules escape from the capillary vessels into the bile ducts with the bile, & is thus carried into the duodenum. From the stimulative effect of heat, the inhabitants of warm climates are very subject to *cholera morbus*; but they do not suffer so much from it as strangers.

The main object in the treatment of bilious fever is to correct the secretion of bile & carry it



out of the system. With this view, cathartics appear to be the most appropriate remedy. Emetics are frequently given; but as they increase the secretion of bile & excite an incidental action in the stomach & neighbouring parts, as bile cannot remain in the stomach without keeping up disease, they ought to be laid aside, & cathartics instituted.

Mercury is generally resorted to as a corrective of a diseased liver; but as it has a tendency to increase the secretion, it ought not to be resorted to in such cases. Opium, salts & other like cathartics not only operate more speedily & effectually, but they afford greater relief to the sufferings of the patient. In the management of bilious morbidities, it has been recommended from the remotest antiquity, to give stimuli with a view of abounding the action of the liver & of facilitating its evacuation. We are next to allay irritation, which is effectually done by the julep & opium. The lancet is to be employed though the pulse should not indicate it, the pulse



in this case is a depressed pulse, therefore if there appears to be ordinary action in the system, we are to use the lancet; but in this case like all others, it is to be regulated according to circumstances. From the effects of Opium on the system, it has been very much exalted in this disease. From the liver being in contact with the stomach, its effects are readily conveyed to the liver which soon becomes languid. After allaying irritation, cathartics are to be employed to carry the remaining bile from the intestines. The particular article to be used, is left to the choice of the practitioner. Elix. Sals combined with balneum Magnesia has been employed with advantage.

Next proceed to that state of the liver where the secretion of bile is partly or entirely suspended.

Bile is the natural purgative of the intestines & when it is wanting, a variety of diseases make their appearance. Any defect in the structure of the



liver may entirely suspend the secretion of bile; it is most frequently dependant on a chronic inflammation of the liver. When this organ is in a septic condition or loaded with tubercles, it performs its office as a secretory gland, very imperfectly.

(As bile is the natural stimulus of the intestines, I consequently follow, that when it is by any means prevented from getting into the intestines, constipation ensues. That there is in constipation a deficiency of bile, we conclude from all vegetable elements having a tendency to run into the acetous fermentation as well as from the fact that scarcely any trace of that fluid appears in the evacuations. It was once supposed that the bile itself would undergo the putrefactive fermentation; but it is now discovered to be a powerful antiseptic. Acting upon this idea, that a deficiency of bile shows the chief cause of constipation W. Osch was led to the administration of repeated emetics in that disease, with a view of exciting an abund



and secretion of what I have already stated to be
the natural purgative of the intestines; in his paper,
(instead of the paper and in this Journal.)

That Diarrhoea & Dysentery are often dependent
upon a want of bile is rendered probable by the fact,
that the evacuations are very rarely mixed with
any portion of that fluid; but more evidently from
the circumstance, that we begin to experience relief
in those diseases immediately after our remedies have
excited a discharge of that fluid.

The treatment of the two last mentioned dis-
eases is various, but that laid down by Dr. Chapman
is believed generally preferred.

Vitiated secretion of bile producing several
forms of bowel complaints & producing, as is now
supposed by most Pathologists, the most frequent cause
of the typhoid disease & other nervous diseases, such as
Erysipelas, Cholera &c.

As bile in its pure or vitiated state, cannot
remain in the stomach without producing disease,



It appears from the symptoms, that it is secondary of
 jaundice in Hypochondriasis. As bile is the proper purga-
 tive of the intestines, we discover in Hypochondriasis,
 as one of the first symptoms, a degree of constipation,
 which adds to the production of all those disagreeable
 symptoms which characterize the disease. It was sup-
 posed, that as the stomach was debilitated by grief
 & anxiety, that the state of this organ had such an
 effect on the liver as to derange its secretion & con-
 sequently was the seat of the disease. But as we know
 such a derangement of the liver, will produce those
 effects on the mind, we conclude that the disease is
 consequent upon such a derangement. We are more
 more particularly confirmed in the opinion, by being
 satisfied, by authority, that a chronic inflammation
 of the liver may exist for sometime before any derange-
 ment of the stomach takes place & from hepatic oc-
 currence more frequently than gastric diseases.

(Hypophoria is generally supposed to be owing to a
 morbid secretion of the stomach; but by looking into



the symptoms as laid down by authors, we are led to
 believe the opinion incorrect. None of the first symp-
 toms are raised without with a hurried tongue which
 is said by most authors to indicate hepatic dis-
 arrangement. Again, the disease is not most, always
 a companion of those who lead a sedentary life.
 As we know the work of digestion is carried on with
 great facility when the body is in a state of rest,
 we cannot suppose that the disease primarily depends
 upon the disarrangement of the stomach, but rather up-
 on a diseased liver, which is brought on by leading
 an inactive life. As a certain degree of exercise is
 absolutely necessary to the keeping up of healthy secre-
 tion of bile, it is evident, that if this exercise is not
 given, the liver will fall into a torpid state, which
 eventually will take on disease, & as the substance
 of the liver is diseased, so will be the secretion. Then
 by a regurgitation of this vitiated bile into the
 stomach, all such symptoms are produced as are
 seen in Dyspepsia. That a regurgitation does take



place, is evident from symptoms already noticed, & that it is irritated, & likewise evident from its not supplying the necessary stimulus to move the intestines which are in a state of inertia. We do not deny, that the disease does sometimes depend upon a diseased condition of the stomach, but not so frequently, as upon a situated secretion of bile.

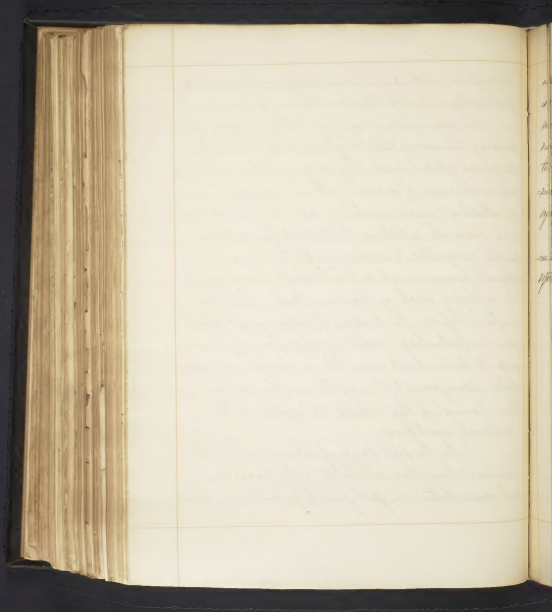
When most frequently depends upon irritating matter in the stimulatory canal. The bile by being so acted by a diseased liver, acquires a character foreign to its nature, which in combination with hardened faeces, makes such an impression on the tender nerves of the intestines, as to affect the whole system. (As all spasmodic diseases depend upon an affection of the nerves, so we suppose; Chorea is produced, from the nerves of the intestines being affected, which is indicated by a flatting pain, first felt in the left hypochondrium. A degree of spasm also takes place in some part of the intestines, else there would not be such a complete state of constipation. By the



nerves of the intestines communicating with various parts of the body, they likewise take out spasm.

The management of these latter diseases are so nearly the same, that I shall include them all under one general head. They may, if taken in time, all be overcome by exercise, with an occasional use of cathartics & proper regulated diet. Cathartics not only move the intestines, but corrects the secretion of bile & promotes its discharge. If the stomach should become weak & debilitated, tonics are to be employed, such as Peruvian Bark, Codrillo, Quapa & Hops. The tincture of hops, says Dr Wharman is particularly useful in dyspepsia of drunkards. As Calomel acts more like a specific in glandular derangement, it may be employed in these diseases, if they should not yield to the treatment mentioned.

In the first stage of lepra, while the intestines retain their sensibility & the feces are not accumulated in great quantity, mild purgatives



will ensue; but in the second stage, where there is convulsions, abated appetite & impaired digestion, more powerful purgatives are to be employed in such a manner as that the latter does well support the effects of the former, till the movement & expulsion of the accumulated matter is effected, when symptoms of returning health will appear.

After the bowels have been thoroughly evacuated, in order to give tone to them & the general system, tonics are to be employed (Hamilton).

